# FORM DEC

FEB 10 2008

Washington, DC

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1427929							
OMB	APPR	OVAL					
		3235-007					
Expires:	April	30,2008 je burden					
Estimated	averag	e burden					
hours per r	espons	se 16.0	0				

SEC USE ONLY						
Prefix	Serial					
DATE REC	CEIVED					
1	1					

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	<del></del>
Membership Units	
Filing Under (Check box(cs) that apply): Rule 504 Rule 505 Rule 506 Section 4(c) Type of Filing: New Filing Amendment	S) ULOE
A. BASIC IDENTIFICATION DATA	1 (0.61); 0.61(), 0.61(
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	08040212
Simpak International, LLC	08040212
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
10350 Bunsen Way, Louisville, KY 40299	502-499-1134
Address of Principal Business Operations (Number and Street, City, State, Zip Code (if different from Executive Offices)  N/A	Telephone Number (Including Area Code)
Brief Description of Business	
Packaging manufacturing	PROCESSEL
A business tract	(please specify): FEB 2 5 2008
Actual or Estimated Date of Incorporation or Organization: O 5 O 4 Actual Est Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Sta CN for Canada; FN for other foreign jurisdiction)	imated te:

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) LC Enterprises, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 4525 Saratoga Woods Drive, Louisville, KY 40299 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) The Yearling Fund I, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Yearling Management, LLC, 600 East Main Street, Louisville, KY 40202 Promoter Check Box(es) that Apply: ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Washington Street Capital, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 10350 Bunsen Way, Louisville, KY 40299 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Michael Lyons Business or Residence Address (Number and Street, City, State, Zip Code) 10350 Bunsen Way, Louisville, KY 40299 Promoter Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Kent Oyler Business or Residence Address (Number and Street, City, State, Zip Code) 10350 Bunsen Way, Louisville, KY 40299 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director General and/or Managing Partner Full Name (Last name first, if individual) Chuck Woods Business or Residence Address (Number and Street, City, State, Zip Code) 10350 Bunsen Way, Louisville, KY 40299 Check Box(es) that Apply: General and/or Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Ron Smith Business or Residence Address (Number and Street, City, State, Zip Code) 10350 Bunsen Way, Louisville, KY 40299

### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter General and/or Check Box(es) that Apply: Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Bill Lomicka Business or Residence Address (Number and Street, City, State, Zip Code) 10350 Bunsen Way, Louisville, KY 40299 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Director Check Box(es) that Apply: ☐ Beneficial Owner General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

	B. INFORMATION ABOUT OFFERING												
_	1. Her the issues sold or does the issues intend to sell to non-apprehind investors in this offering?								Yes	No <b>⊠</b>			
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Ľ	<u> X </u>				
2.								\$ <sup>25,</sup>	114.10				
									Yes	No			
3.									X				
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
	Full Name (Last name first, if individual) N/A												
		Residence	Address (N	lumber and	Street, C	ity, State, Z	ip Code)			<u> </u>	<u>-</u>		<del></del>
			···	1									
Nar	ne of Ass	ociated Bi	roker or De	aler									
Sta			Listed Has										
	(Check	"All States	s" or check	individual	States)	•••••		********	***************************************	*************	•••••	☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful N/	•	Last name	first, if ind	ividual)		•						-	
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nar	ne of Ass	ociated Br	oker or De	aler						1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
Sta	tes in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit I	urchasers				<u>.                                    </u>		
	(Check	"All States	s" or check	individual	States)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		****************	*****************	*************	***************************************		States
	AL IL MT	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful N/A	•	Last name	first, if ind	ividual)									
		Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)				·		
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)									l States				
IL IN IA KS KY LA ME MD MA MI MN M MT NE NV NH NJ NM NY NC ND OH OK O									HI MS OR WY	MO PA PR			

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			A
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt			\$
	Equity	<u>\$_251,141.0</u>	0	<u>\$ 251,141.00</u>
	☑ Common ☐ Preferred			
	Convertible Securities (including warrants)	<b>s</b>		s
	Partnership Interests	\$		\$
	Other (Specify)	<b>s</b>		\$
	Total	\$ <u>251,141.0</u>	0	<u>\$ 251,141.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	7		\$_251,141.00
	Non-accredited Investors	0		s_0.00
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505	•		\$
	Regulation A			s
	Rule 504			\$
	Total		_	\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			<u> </u>
	Transfer Agent's Fees	•••••		\$
	Printing and Engraving Costs			s
	Legal Fees	********	$\overline{Z}$	\$ 7,500.00
	Accounting Fees	*******		\$
	Engineering Fees	*******		s
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify)			\$
	Total			s 7,500.00

	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C – proceeds to the issuer."	- Question 4.a. This difference is the	e "adjusted gross	243,641.00 \$
5.	Indicate below the amount of the adjusted gross peach of the purposes shown. If the amount for a check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Pa	ny purpose is not known, furnish of the payments listed must equal th	an estimate and	
	•		Payments to	
			Officers,	_
			Directors, & Affiliates	Payments to Others
	Salaries and fees			<del>-</del>
	Purchase of real estate			
	Purchase, rental or leasing and installation of ma	chinery	_	_
	Construction or leasing of plant buildings and fa		<del></del>	_
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass issuer pursuant to a merger)	alue of securities involved in this sets or securities of another		
	Repayment of indebtedness			_
	Working capital			
	Other (specify):			
			<u>-</u>	
			\$	_ 🗆 \$
	Column Totals		\$ 0.00	\$ 243,641.00
	Total Payments Listed (column totals added)			243,641.00
		D. FEDERAL SIGNATURE		-
sign	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fu information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Ex-	change Commission, upon writt	
Issu	er (Print or Type)	Signature	Date	······································
Sin	pak International, LLC	Muluto	_ 21	14/08
Nan	e of Signer (Print or Type)	Title of Signer (Print or Type)		
Mich	ael Lyons	President		
		<u> </u>		<del></del>

C: OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

END

ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)